

STATE OF MONTANA
ANTIQUE SLOT MACHINE DEALER LICENSE
ANNUAL LICENSE FEE: \$50

Montana Department of Justice
Gambling Control Division
2550 Prospect Ave.
P.O. Box 201424
Helena, MT 59620-1424
Phone: (406) 444-1971
Fax: (406) 444-9157

OFFICE USE ONLY

CHECK NO.: _____

CHECK AMN'T: _____

REFUND: _____

LICENSE NO.: _____

AN IMPROPERLY COMPLETED APPLICATION WILL BE RETURNED FOR CORRECTIONS

TYPE OR PRINT LEGIBLY:

Licensee Name

Business Address (Box and Street Number)

City State Zip

Social Security No. or Federal I.D. No.

Business Phone No.

CHECK THE APPROPRIATE BOXES:

Are you a licensed operator?

No Yes

Are you a licensed manufacturer?

No Yes

Are you a licensed distributor?

No Yes

Are you a licensed route operator?

No Yes

Do you anticipate selling more than three
No Yes antique slot machines per year?

If yes, explain: _____

I AFFIRM I AM AUTHORIZED TO MAKE THIS APPLICATION FOR THE APPLICANT AND THAT THE ANSWERS CONTAINED HEREIN ARE TRUE AND COMPLETE. IF THIS APPLICATION OR ATTACHMENTS CONTAIN FALSE INFORMATION, I UNDERSTAND I MAY BE SUBJECT TO THE CRIMINAL PENALTIES OF MONT. CODE ANN. §45-7-202, 45-7-203, 45-7-208, OR REVOCATION OF ANY GAMBLING LICENSES GRANTED PURSUANT TO THIS APPLICATION.

Signature of Applicant

Printed Name of Applicant

Date

Please attach a check or money order for \$50.
Make Payment Payable to the "Gambling Control Division".

Form 15/slot mach

**STAPLE
PAYMENT HERE**